

## Louisiana Board of Pharmacy

3388 Brentwood Drive
Baton Rouge, Louisiana 70809-1700
Telephone 225.925.6496 ~ Facsimile 225.925.6499
www.pharmacy.la.gov ~ E-mail: info@pharmacy.la.gov



## **Application for New Louisiana Pharmacy Technician Candidate Registration**

## **Before You Begin:**

- The Louisiana Board of Pharmacy is the state agency established by the Louisiana Legislature and authorized to regulate the practice of pharmacy in the state of Louisiana.
- The Board accomplishes its legislative mandate by (1) restricting the entry into pharmacy practice to qualified applicants, and (2) monitoring their practice for compliance with the federal and state laws and rules governing the practice of pharmacy.
- The Board has adopted rules governing pharmacy technicians and pharmacy technician candidates. A copy of those rules *Chapter 9 ~ Pharmacy Technicians* is available in the *Louisiana Pharmacy Law Book* found on the Board's website at www.pharmacy.la.gov.
- With the privilege of obtaining a pharmacy technician candidate registration and pharmacy technician certificate comes the personal responsibility for reading, understanding, and complying with the Board's rules. In addition to the rules, the Board routinely publishes guidance information in its quarterly newsletter as well as bulletins and alerts. This information is distributed electronically; therefore, we encourage your inclusion of an email address on your application.
- The pathway to obtaining a pharmacy technician certificate begins with completing the training requirements. To complete the training requirements, the applicant must first obtain a pharmacy technician candidate registration. This application packet is for the pharmacy technician candidate registration (not the pharmacy technician certificate).

#### **Qualifications for Pharmacy Technician Candidate Registration:**

- The applicant shall be at least 18 years of age. In addition to entering the date of birth on the application form, the applicant shall attach a legible copy of their birth certificate. In the event the birth certificate is recorded in a language other than English, a certified translation copy shall be attached. In the event a birth certificate is not available, we can accept a copy of a valid and unexpired passport, or in the alternative, a copy of a naturalization document from the U.S. government.
- 2) The applicant shall confirm their identity by entering their current legal name on the application form. In the event the name on the birth certificate differs from the current legal name entered on the application form, the applicant shall provide copies of the legal documents for every name change in the interim; examples of acceptable documents include marriage licenses and court decisions. Copies of driver's licenses are not acceptable for this purpose.
- 3) The applicant is not required to document their citizenship; however, the applicant is required to verify their legal authority to work in the United States by entering their Social Security number on the application form and attaching a legible copy of their Social Security card. There is no substitute for the Social Security number and the staff is required to return any application without this information and documentation.
- 4) The applicant shall meet <u>one</u> of three eligibility options: Option A

Provide proof of enrollment in a nationally-accredited and board-approved pharmacy technician training program. This document can be obtained from your training program. Your completion date of the training program may not precede the date of your application.

Option B

Provide (1) proof of successful completion of a board-approved pharmacy technician certification examination [see below for additional information about examinations] AND (2) proof of successful completion of a high school approved by a state department of education. The high school diploma must bear the name of the school, the name of the graduate, and the date of graduation. An acceptable alternative to a high school diploma is a transcript issued by the

school, marked "Official", which bears the name of the school, the name of the graduate, and the graduation date. An alternative to the high school diploma is a General Equivalency Diploma (GED) approved by a state department of education; it must bear the name of the graduate and the date of issue. If there is no high school or GED document available, we can accept a university transcript, marked "Official", which bears the name of the university, the name of the graduate, the degree conferred, and the date conferred.

Option C

Provide (1) proof of credentialing as a pharmacy technician by another state board of pharmacy, (2) evidence of practice as a pharmacy technician for at least one year in that state, and (3) proof of successful completion of a board-approved pharmacy technician certification examination [see below for additional information about examinations]. The proof of credentialing requires a copy of the license from another state board of pharmacy, or in the alternative, website verification thereof. Evidence of practice in another state requires completion of Form No. 32 – Pharmacist's Certification of Pharmacy Technician Practice in Non-Resident State, available on the Board's website.

- 5) Exceptions:
  - A pharmacist or pharmacist intern whose board credential has been denied, suspended, revoked, or restricted for disciplinary reasons by any board of pharmacy shall not be a pharmacy technician candidate or pharmacy technician.
  - b. A pharmacist or pharmacist intern whose board credential is lapsed shall not be a pharmacy technician candidate or pharmacy technician until such lapsed credential is relinquished or recalled through non-disciplinary board action.
- 6) The application fee is \$25.00. The Board can accept a check or money order drawn on any bank located within the United States, payable in U.S. dollars to the Louisiana Board of Pharmacy.
- 7) This application shall expire one year after the date of its receipt in the Board office. In the event the application expires before the registration is issued, the application shall be rendered null and void, and all fees attached shall be forfeited. Continued progress shall require a new application form and fee.

#### **Criminal Background Check (CBC):**

- The Louisiana Legislature (La. R.S. 37:1216) requires the Board to conduct a criminal history check on applicants for all credentials.
- Upon receipt of your properly completed application, staff will provide you with a packet of materials necessary to complete this process. The applicant shall submit their fingerprints for analysis by the Louisiana State Police and the Federal Bureau of Investigation (FBI). The applicant shall return the packet to the Board office, who will deliver the packet to the La. State Police Headquarters. Following their analysis, those agencies will prepare a report for the Board. Board staff must review that report before they can issue your registration.
- The time required to complete this process varies widely from as little as one week to more than six weeks. When the analysts determine the fingerprints are of insufficient quality, the applicant must resubmit their fingerprints, which takes additional time for processing. The CBC process is controlled by the La. State Police and FBI. The Board has no control over how long it takes for those agencies to send their report to the Board. Applicants can substantially reduce the amount of time for that process by completing their packet at the La. State Police Headquarters in Baton Rouge, La. Instructions for this option are included in the packet of materials provided to the applicant, and the La. State Police charges an additional fee for this on-site service.
- The fee for the CBC is \$38.00, and it is payable to the La. State Police, not the Board of Pharmacy. The La. State Police does not accept cash or personal checks. Checks erroneously made payable to the Board of Pharmacy shall be returned to the applicant and will delay the CBC process. The fee for the on-site service at La. State Police is \$10.00 and is payable to that agency.
- We are not permitted to accept criminal history reports prepared by applicants, nor can we accept criminal history reports generated by or for another agency.

(continued)

#### **Earning Hours of Practical Experience:**

- A candidate shall possess a registration prior to performing any professional function or earning any hours of practical experience in a pharmacy.
- A candidate shall not work in a pharmacy where its permit is on probation with the board.
- A candidate shall not work under the supervision of a pharmacist whose license is on probation with the board.
- A candidate may receive board credit for a maximum of 50 hours per week.
- All practical experience hours earned must be recorded on Form No. 31 Pharmacist's Certification
  of Hours of Practical Experience Earned by Pharmacy Technician Candidates, available on the
  Board's website, and submitted to the Board office for approval.
- A separate Pharmacist's Certification form must be completed for each pharmacy where hours were earned.
- Hours of practical experience shall expire two years after the expiration date of the registration and shall no longer be valid for pharmacy technician certification.

## **Pharmacy Technician Certification Examinations:**

- The Louisiana Board of Pharmacy does not administer examinations for technician certification.
- The Board has approved two organizations which administer pharmacy technician certification examinations – Pharmacy Technician Certification Board (PTCB) and National Healthcareer Association (NHA).
- To apply for the pharmacy technician certification examination, the applicant is required to contact the
  organization of their choice, complete their application, pay their fee, and comply with all requirements
  of that organization. The examination fee is retained by that organization; the Board does not collect
  or share those fees.
- The Pharmacy Technician Certification Board (PTCB) [Telephone 800.363.8012 or <a href="www.ptcb.org">www.ptcb.org</a>]
   administers the Pharmacy Technician Certification Examination (PTCE). The Board approved that
   examination effective January 1, 2000. The Board will accept PTCB certificates dated on or after
   January 1, 2000.
- The National Healthcareer Association (NHA) [Telephone 800.499.9092 or <a href="www.nhanow.com">www.nhanow.com</a>] administers the Examination for Certification for Pharmacy Technicians (ExCPT). The Board approved that examination effective January 1, 2018. The Board will accept NHA certificates dated on or after January 1, 2018.
- The Board does not require a pharmacy technician to maintain the certification issued by PTCB or NHA because the Board has its own continuing education (CE) requirements for pharmacy technicians. If the pharmacy technician wishes to maintain their certification from PTCB or NHA, they should comply with the requirements issued by those organizations. While CE certificates may be valid for both certification and licensure, the certification is not a substitute for compliance with the Board's CE rules. Please note that a PTCB or NHA certificate is not a license and is not valid for practice in Louisiana.

## **Pharmacy Technician Candidate Registration:**

- The pharmacy technician candidate registration shall expire 24 months after the date of issue, and it shall not be renewed.
- The Board may issue only one registration to a person; multiple credentials of the same type are not permitted.
- The board reserves the right to refuse to issue, recall, or discipline a candidate registration for cause.
- Candidate shall wear appropriate attire and be properly identified as to name and candidate status while on duty in the prescription department.
- A candidate shall notify the board, in writing, no later than 10 days following any change of mailing address or any change of pharmacy employment. Form No. 90 is available on the Board's website to notify the Board of such changes.
- When the candidate has completed the training requirements to qualify for the pharmacy technician certificate, the candidate may apply at their leisure. It is not necessary (or prudent) to wait until the expiration date of the candidate registration to apply for the pharmacy technician certificate.

#### **Qualifications for the Pharmacy Technician Certificate:**

- 1) The applicant shall demonstrate one of the following educational competencies:
  - a. In the event the candidate obtained their registration based on their selection of Option A (enrollment in a nationally-accredited and board-approved pharmacy technician training program), the applicant shall provide a copy of their diploma or other completion certificate issued by the program.
  - b. In the event the candidate obtained their registration through any other method, the applicant shall provide evidence of at least 600 hours of practical experience earned in a pharmacy in Louisiana using a pharmacist affidavit form supplied by the Board.
- 2) The applicant shall demonstrate successful completion of a board-approved pharmacy technician certification examination. The Board will accept either one of the following documents:
  - a. A certificate issued by PTCB dated on or after January 1, 2000; or
  - b. A certificate issued by NHA dated on or after January 1, 2018.

#### **Pharmacy Technician Certificate:**

- The initial pharmacy technician certificate shall expire on June 30 regardless of the date issued.
- Pharmacy technicians must apply for the renewal of their certificate every year, using the application form supplied by the Board. The Board will send a renewal reminder to the pharmacy technician approximately 60 days prior to the expiration date of their certificate.
- To qualify for renewal of a pharmacy technician certificate, the technician must obtain at least 10 hours of ACPE-accredited technician-specific continuing education (CE) dated during the twelve-month period preceding the expiration date of their certificate. Further, the pharmacy technician must retain their CE records electronically with CPE Monitor. CPE Monitor is a free service provided by the National Association of Boards of Pharmacy (NABP). Pharmacy technicians must establish their eProfile account at CPE Monitor, free of charge, at <a href="https://www.nabp.pharmacy">www.nabp.pharmacy</a>.
- The fee for a timely submitted renewal application is \$50.00. The late renewal of an expired certificate will incur a penalty fee in addition to the renewal fee, with the total due of \$75.00. A certificate expired for more than 30 days cannot be renewed, but it may be reinstated for a fee of \$275.00.
- A pharmacy technician shall not practice with an expired certificate.



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## **Application for New Louisiana Pharmacy Technician Candidate Registration**

<u>Note:</u> This application form shall be valid for up to one year after the date of its receipt in the Board office. In the event the registration is not issued by that date, the application shall become null and void and any fees attached hereto shall be forfeited. The application fee for this registration is \$25. We accept checks or money orders drawn on any bank located within the U.S. that are payable in US dollars to the Louisiana Board of Pharmacy.

Section 1 – Personal Ir	nformation			
Current Legal Name:	First Name	Middle Name(s)	Last Name	Suffix (Jr., Sr. III, IV, etc.)
List All Other Names (Maid				
Place of Birth (City & State + C	Country if not USA):			
Date of Birth:	Gender:	Race:		
Social Security Number:			-	
Section 2 – Contact In	formation			
Mailing Address:				
City, State, ZIP:				
E-mail Address:				
Telephone Numbers (with A/C	):		Mobile	Home Fax
following three eligibility option  Option A  Requires proof of enrollment in approved training programs and document, available from train  Option B  Requires (1) proof of successf completion of a high school apprequired: (1) Copy of PTCB of 2018) AND (2) copy of high social and the pharmacy technician for at lead certification examination.	nician candidate regises:  n a nationally-accredite valiable on board websing program administrate and completion of a board proved by a state depertificate issued on or shool [or GED] diplomation as a pharmacy test one year in that state the complete of Pharmacy Technicals.	ed and board-approviate, at www.pharma rator.  ard-approved technic partment of education after January 1, 200 a or transcript.  archnician by another te, AND (3) proof of (1) Copy of state lice cian Practice in Non-	ved pharmacy technician tr cy.la.gov). Documentation cian certification examination, or an equivalent degree o or copy of ExCPT certific estate board of pharmacy, (successful completion of a nse or website verification Resident State, available of	on, AND (2) proof of successful of education. <i>Documentation</i> ate issued on or after January 1, (2) evidence of practice as a board-approved technician thereof, (2) completed Form No. on board website, AND (3) Copy of
For Board Use Only:	, , , , , , , , , , , , , , , , , , , ,	_ ,,		
Check No.:	Amount:			
Approved by:	Issued:			
Registration No :				

Ap	plicant Na	ıme:				Social Sec	curity Number:		
Se	ction 4	– Pharma	cy Creden	itials from O	ther States				
		er been licens any state othe			nerwise approved to p	ractice as a pharma	cist, pharmacy inter	rn, or pł	narmacy
		No [Proceed	to Section 5]	□ Ye	es [Record information	n below; attach addit	ional pages as nec	essary]	
	State	Type of Creden	ntial -	Credential No .	Date Issued	Expiration Date	Disciplined?	□ No	☐ Yes
							Dissiplinado	□ Na	□ Yes
	State	Type of Creden	ntial -	Credential No.	Date Issued	Expiration Date	Disciplined?	□ NO	⊔ res
dire	ectly to the	Board office	<ul> <li>certifying the</li> </ul>	ne current status	a letter from the state of that credential. Th r the credential has ev	e letter must include	the credential num	ber, the	
La. as exp per ger crir	R.S. 37:1. a condition ounged. Uform a crimerated for minal histo	n for the issua pon receipt o minal history r or by anothe ry – even if ex	es the Board to ance of that co f this properly record check or agency can expunged – ma	redential. La. R. y completed appl with the Louisiar not be accepted ay result in the do	ninal history record che S. 44:9 authorizes the lication, the Board will na State Police and the to satisfy this requirer enial of this application on or revocation of tha	Board to access an provide the applicar e Federal Bureau of ment. Your failure to n and the refusal to i	d use records that lat with materials new Investigation. Previous disclose any prior	have be cessary vious re disciplii	een to ports nary or
1.	☐ Yes		for any c jurisdiction nough an arres een restored, y	A citation or su Has/have warra Have you been Pled guilty / "no Been sentence riminal offense, i on? t or conviction has loo ou must answer "Y	ed any of the following mmons, and/or ant(s) been issued ag arrested, charged, at o contest" / nolo conte d or pardoned, ncluding all misdemed been dismissed, deferred es" and mail certified copsuch as speeding or parkts must be reported, regardents.	ainst you, and/or raigned, indicted, co ndere / "best interest anors and felonies, in d, diverted, expunged, o ities of the decision docu	" or any similar ple n any local, state, o r pardoned, and even uments along with you to be reported; howey	r federa if your o	al ivil rights
2.	☐ Yes		Have you had a professional license as a pharmacy technician or any other health care provider denied, suspended, revoked, or otherwise sanctioned or restricted or limited, including voluntary surrender of license, including restrictions associated with participation in confidential alternatives to disciplinary programs, and/or  Do you now have any disciplinary action pending against you by any state licensing agency – other than the Louisiana Board of Pharmacy?  In the event of an affirmative reply to this question, please provide your personal letter of explanation as well as certified copies of all related documents from the agency.						
3.	□ Yes		Have you been named as a defendant in a civil/malpractice case relating to your practice of pharmacy? and/or Has a medical review panel opinion been rendered relating to your practice of pharmacy? and/or Have you been reported to the National Practitioner Data Bank (NPDB)? and/or Have your clinical privileges been limited, restricted, suspended, or revoked?  In the event of an affirmative reply to this question, please provide your personal letter of explanation as well as a copy of the malpractice suit or medical opinion or report from the NPDB.						
4.	□ Yes	all trea	or psych event of an affir tment records	iatric condition the mative reply to this	d with, do you have, o nat might affect your a question, please provide maries, as well as written y.	bility to safely practic	e as a pharmacy to explanation as well as	echnicia copies	n ? of any and
5.	☐ Yes	all trea	altering s event of an affir tment records	substances, drug mative reply to this	question, please provide maries, as well as written	your personal letter of	explanation as well as	copies	of any and

Sectio	n 6 – Pl	hotographic Identification					
• • • • • Date of	staple and Photograph	a recent photograph in the block at right, using one at the top and one at the bottom. Do not use glue or tape. Iraph should be recent (within last six months). Iraph must show a clear likeness of the applicant's nd shoulders, with eyes open. Iraphs reproduced on a black/white copy machine are ceptable.  Use a photograph removed from an identification lar card.	Staple one recent passport size (2"x2") fade-proof photograph in this block using the guidelines at the left.				
Date of	Tiologi	арт.					
		equired Attachments sence of the required attachments:					
□ Yes	□ No	Birth certificate - must be legible copy. If not in English, must be acc	ompanied by certified translation.				
□ Yes	□ No	☐ No Legal documentation of all name changes beyond name recorded on birth certificate (see application notes).					
□ Yes	□ No	No Social Security card – must be legible copy.					
□ Yes	□ No	Copy [or website verification thereof] of other pharmacy credentials identified in Section 4.					
□ Yes	□ No	Documents as needed from Section 5.					
		Eligibility Option A					
□ Yes	□ No	Proof of enrollment in a nationally-accredited and board-approved pharmacy technician training program.					
		Eligibility Option B					
□ Yes	□ No	PTCB certificate dated on or after January 1, 2000 or ExCPT certificate dated on or after January 1, 2018.					
□ Yes	□ No	High school diploma – must be legible copy [an official transcript indicating date of graduation is acceptable].					
		Eligibility Option C					
□ Yes	□ No	Copy of pharmacy technician license from another state board of pharmacy [or website verification thereof].					
□ Yes	□No	Form No. 32 – Pharmacist's Certification of Pharmacy Technician Practice in Non-Resident State.					
□ Yes	□ No						
		, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,				
Sectio	n 8 – Aı	pplicant's Attestation & Signature					
By my s	signature	below, I agree with and attest to the following statements:					
•	With an applica I submitechnic authori I under attachr	e person referred to in this application, and the photograph about a wareness of the penalties of perjury, I affirm that all of the intion and all of its attachments is true and correct in every respective in this application and all of its attachments for the purpose of operation candidate registration, in order to engage in the practice of zed by the Louisiana Pharmacy Practice Act. Testand that furnishing false information or omitting required informents may result in the denial of my application and the Board' egistration has already been issued, then the suspension or reversely.	formation I have provided in this ect. btaining a Louisiana pharmacy pharmacy in the state of Louisiana as rmation in this application and all of its s refusal to issue the registration – or				
	Da	ate	Signature of Applicant				

\_\_\_\_\_Social Security Number: \_\_\_\_\_

Applicant Name: \_\_\_\_\_